Image# 28992220563 09%/2008 11:55

## **FEC FORM 5**

### REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

(a) Name of Individual, Organization or Corp	poration	一 <sup>:</sup>				
DEFENDERS OF WILDLIFE ACTION						
(b) Address (number and street)	ck if different than previously reported					
(c) City, State and ZIP Code		a and the state of the state of				
WASHINGTON	DC 20036	3. FEC Identification Number  C C90007907				
2. Corporate filers only  Is the filer a qu	alified nonprofit corporation?	<b>C</b> C90007907				
Individual filers only Name of Emplo	oyer	Occupation				
4. TYPE OF REPORT (check appro	opriate boxes):					
(a) April 15 Quarterly Report	24-Hour Notice 🛛 48-H	our Notice				
☐ July 15 Quarterly Report						
October Quarterly Report						
☐ January 31 Year-End Rep	ort					
January 31 16al-Lind 110p	ort					
(b) Is this Report an amendment?	? Yes X No					
5. COVERING PERIOD: FROM	5. COVERING PERIOD: FROM 08 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	THROUGH					
	$\begin{bmatrix} M & M \\ 0 & 8 \end{bmatrix} / \begin{bmatrix} D & D \\ 2 & 1 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$					
6. TOTAL CONTRIBUTIONS		1500.00				
7. TOTAL INDEPENDENT EXPEN	DITURES	3324.37				
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.						
TYPE OR PRINT NAME OF PERSON COMP	LETING FORM SIGNATURE	DATE				
William Lutz		09/20/2008				
NOTE: Submission of false, erroneous	s or incomplete information may subject the person signing this re	port to the penalties of 2 U.S.C 437g.				

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

# SCHEDULE 5-A ITEMIZED RECEIPTS

PAGE 2/6

A	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee					
	NAME OF FILER (In Full)					
	DEFENDERS OF WILDLIFE ACTION F	UND				
۹.	Full Name (Last, First, Middle Initial)				Date of Receipt	
	Mary Diamond Mailing Address				M M / D D / Y Y Y	
	172 Florence Ave				08 20 2008	
	City	State	Zip Code		Transaction ID: F56.000001	
	Mill Valley	CA	94941		Amount of Each Receipt this Period	
	FEC ID number of contributing			_	300.00	
	federal political committee.	C				
	Name of Employer			Occupation		
	Requested			Requested		
В.	Full Name (Last, First, Middle Initial)				Date of Receipt	
	Christine Walter Mailing Address				M M / D D / Y Y Y Y	
	1314 Talbot Ave				08 20 2008	
	City	State	Zip Code		Transaction ID: F56.000002	
	Berkeley	CA	94702		Amount of Each Receipt this Period	
	FEC ID number of contributing				450.00	
	federal political committee.	С				
	Name of Employer			Occupation		
	Requested			Requested		
C.	Full Name (Last, First, Middle Initial)				Date of Receipt	
	Tracey Swanson Mailing Address				$\begin{bmatrix} M & M \\ 0 & 8 \end{bmatrix}  \begin{bmatrix} D & D \\ 2 & 0 \end{bmatrix}  \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$	
	14518 E Sweetwater Ave					
	City	State	Zip Code		Transaction ID: F56.000003	
	Scottsdale	AZ	85259		Amount of Each Receipt this Period	
	FEC ID number of contributing	С			200.00	
	federal political committee.	<u> </u>				
	Name of Employer			Occupation		
	Requested			Requested		
D.	Full Name (Last, First, Middle Initial)  Carolyn Metcalf				Date of Receipt	
	Mailing Address 2350 Foothill Blvd Unit 9				$\begin{bmatrix} M & M & M \\ 0 & 8 \end{bmatrix} \  \   \begin{bmatrix} D & D \\ 2 & 0 \end{bmatrix} \  \   \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix} $	
	City	State	Zip Code		Transaction ID: F56.000004	
	La Canada Flintrid	CA	91011		Amount of Each Receipt this Period	
	FEC ID number of contributing			_	300.00	
	federal political committee.	С			300.00	
	Name of Employer			Occupation		
	Requested			Requested		
_	IDTOTAL «(D t. Tit. D (				1250.00	
-SI	SUBTOTAL of Receipts This Page (optional)				120000	
Т	TOTAL This Period (last page carry total to Line 6)					

## SCHEDULE 5-A ITEMIZED RECEIPTS

PAGE 3/6

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF FILER (In Full) DEFENDERS OF WILDLIFE ACTION FUND A. Full Name (Last, First, Middle Initial) Date of Receipt M Jill Kennard <sup>D</sup> 2 <sup>D</sup> Mailing Address 103 Cheltenham Rd 2008 Transaction ID: F56.000005 City State Zip Code DE 19707 Hockessin Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Requested Requested

SUBTOTAL of Receipts This Page (optional)	250.00	
TOTAL This Period (last page carry total to Line 6)	1500.00	

#### SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE <b>4</b> / <b>6</b>
FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

DEFENDERS OF WILDLIFE ACTION FUND

Full Name (Last, First, Middle Initial) of Payee			Date			
Wal Mart			M M / D D / Y Y Y Y			
Mailing Address			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
301 San Mateo Blvd SE			Amount			
City	State	Zip Code	68.11			
Albuquerque	NM	87108				
Purpose of Expenditure		Category/	Office Sought: House State: NM			
supplies		Туре	Senate X Senate District:			
Name of Federal Candidate Supported or Opposed	by Expenditure	e:	President ———			
Steve Pearce			Check One: Support X Oppose			
Calendar Year-To-Date Per Election			Disbursement For: Primary X General			
for Office Sought		516.51	Other (specify)			
Full Name (Last, First, Middle Initial) of Payee			Date			
Mario's Restaurant			M M / D D / Y Y Y			
Mailing Address			08 20 2008			
2401 San Pedro Dr NE			Amount			
City	State	Zip Code	28.27			
Albuquerque	NM	87102				
Purpose of Expenditure		Category/	Office Sought: House State: NM			
pizza for canvassers		Type	Senate X Senate			
Name of Federal Candidate Supported or Opposed	by Expenditure	9:	President District:			
Steve Pearce			Check One: Support X Oppose			
Calendar Year-To-Date Per Election			Disbursement For: Primary X General			
for Office Sought		702.73	2008 Other (specify)			
Full Name (Last, First, Middle Initial) of Payee			Date			
Smith's						
Mailing Address			0 8 / D D / Y Y Y Y Y			
6001 Lomas NE			Amount			
City	State	Zip Code	20.05			
Albuquerque	NM	·				
Purpose of Expenditure		Category/	Office Sought: House State: NM			
snacks		Type	Senate X Senate			
Name of Federal Candidate Supported or Opposed	by Expenditure	e:	President District:			
Steve Pearce			Check One: Support X Oppose			
Calendar Year-To-Date Per Election			Disbursement For: Primary X General			
for Office Sought		91.23	2008 Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditu	res		116.43			
(,,						
(b) SUBTOTALof Unitemized Independent Expend						
(a) TOTAL lades at 1 1 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
(c) TOTAL Independent Expenditures(carry total from last page forward to Lin						
, , , , , , , , , , , , , , , , , , , ,	•					

# SCHEDULE 5-E

PAGE	5 / 6	

NAME OF FILER (In Full)

ITEMIZED INDEPENDENT EXPENDITURES FOR LINE 7 FOR FORM 5 DEFENDERS OF WILDLIFE ACTION FUND Full Name (Last, First, Middle Initial) of Payee Date Jesse Lifton M M 2008 Mailing Address Amount 1600 San Pedro Blvd NE 100.00 State Zip Code NM 87102 Albuquerque Purpose of Expenditure Office Sought: Category/ House State: NM cell phone bill Type Χ Senate Senate District: \_ President Name of Federal Candidate Supported or Opposed by Expenditure: Steve Pearce Check One: Support X Oppose Disbursement For: X General Primary Calendar Year-To-Date Per Election 2008 7576.37 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Enterprise Rent-a-car м м 2008 Mailing Address Amount 1200 Lomas Ave NE 2350.00 Zip Code City State Albuquerque NM 87102 Purpose of Expenditure Office Sought: House State: NM Category/ van rental Type Χ Senate Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: Steve Pearce Check One: Support X Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2883.61 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Ed Yoon M 8 2008 Mailing Address Amount 611 Lead Ave SW #502 32.48 Zip Code City State NM 87102 Albuquerque Purpose of Expenditure Office Sought: State: NM Category/ House mileage Type Χ Senate Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: Steve Pearce Check One: Support X Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2008 38089.47 for Office Sought Other (specify) 2482.48 (a) SUBTOTAL of Itemized Independent Expenditures ..... (b) SUBTOTALof Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures ..... (carry total from last page forward to Line 7)

#### SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 6/6
FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

Full Name (Last, First, Middle Initial) of Payee				Date	
Joshua Sabato				M M / D D / Y	Y Y Y
Mailing Address				0.8 2.1	2008
611 Lead Ave SW #505				Amount	
City	State	Zip Code			100.00
Albuquerque	NM	87102			
Purpose of Expenditure		Category/	Offic	e Sought: House	State: NM
cell phone bill		Type	ll se	enate X Senate _	State:
Name of Federal Candidate Supported or Opposed	hy Expenditure:		┤ ~		istrict:
Steve Pearce	by Exponditure.	•	Chec	k One: Support X	Oppose
					_
Calendar Year-To-Date Per Election		18435.44		rsement For: Primary L	X General
for Office Sought		10433.44	Ot	her (specify)	
Full Name (Last, First, Middle Initial) of Payee			<u> </u>	Date	
Ed Yoon				M M / D D / N	/
Mailing Address				08 / 21	2008
611 Lead Ave SW #502				Amount	
City	State	Zip Code			625.46
Albuquerque	NM	87102			
Purpose of Expenditure		Cotomoral	Offic	e Sought: House	- NIM
cell phone bill and internet cards		Category/ Type		enate X Senate _	State: NM
Name of Federal Candidate Supported or Opposed	hy Evnenditure:				istrict:
Steve Pearce	by Experience.	•	Chec	k One: Support X	Oppose
Calendar Year-To-Date Per Election		38089.47	1	2008	X General
for Office Sought		30003.47	Ot	her (specify)	
(a) SUBTOTAL of Itemized Independent Expenditur	'es				725.46
(b) SUBTOTALof Unitemized Independent Expendi	tures			L	
				00	224 27
(c) TOTAL Independent Expenditures				33	324.37
(carry total from last page forward to Line	e /)				